

III

AMERSHAM RURAL DISTRICT COUNCIL



REPORT

of the

Medical Officer of Health

and the

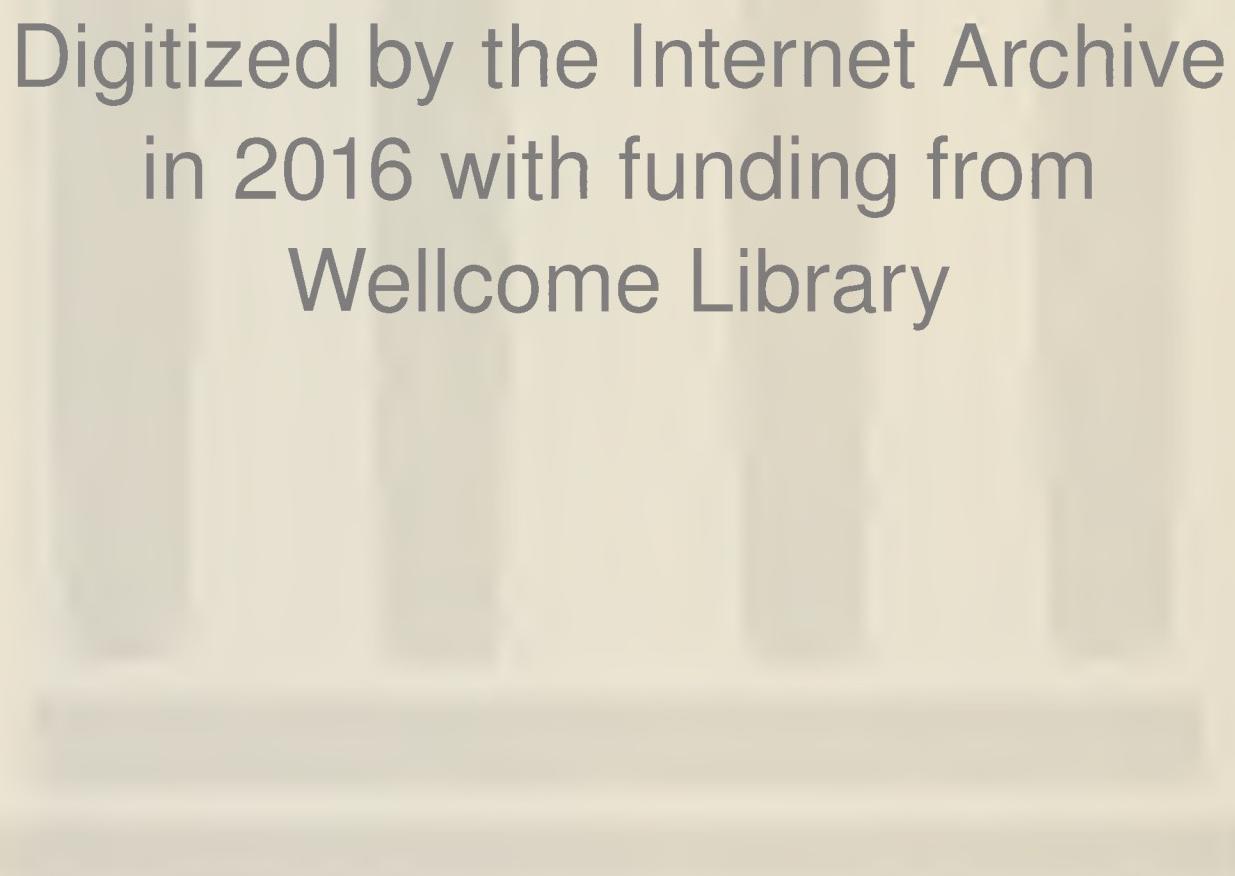
Chief Public Health Inspector

FOR THE YEAR 1972



RURAL INDUSTRY, 1972





Digitized by the Internet Archive
in 2016 with funding from
Wellcome Library

<https://archive.org/details/b28804879>

AMERSHAM RURAL DISTRICT COUNCIL

REPORT

of the

Medical Officer of Health

and the

Chief Public Health Inspector

FOR THE YEAR 1972

AMERSHAM RURAL DISTRICT COUNCIL

Chairman:

Mr. B. T. Kelly
(at 31st December, 1972)

PUBLIC HEALTH COMMITTEE (at 31st December, 1972)

Chairman:

Mrs. L. M. B. STONEHAM

Vice-Chairman:

Mrs. W. CORKISH

Councillors:

Mrs. B. Barnes
Mr. C. S. G. Buszard
Mr. E. Collier
Mr. D. M. Griffiths
Mr. D. E. Hazell
Mrs. B. R. Ifftner
Mr. B. T. Kelly (*ex-officio*)
Mrs. M. Orpen
Mrs. E. Stevens
Mrs. M. R. Tomlinson
Mrs. M. A. Wainwright
Mrs. K. B. W. Wickham

PUBLIC HEALTH OFFICERS
(at 31st December, 1972)

Medical Officer of Health:

Dr. B. H. BURNE, M.R.C.S.(ENG.), L.R.C.P.(LOND.), D.P.H.
M.F.C.M.

(The Medical Officer of Health is also Medical Officer of Health
for Chesham Urban District Council and Beaconsfield Urban
District Council; Deputy Divisional School Medical Officer and
Departmental Medical Officer)

Deputy Medical Officer of Health:

Dr. W. J. RISK, M.B., CH.B.

Chief Public Health Inspector:

Mr. F. G. CAUDERY, F.A.P.H.I., M.R.S.H.

Deputy Chief Public Health Inspector:

Mr. W. E. JONES, M.A.P.H.I.

Additional Public Health Inspectors

Mr. R. POWELL, M.A.P.H.I.
Mr. H. H. COMESTON, M.A.P.H.I.
Mr. G. ECCLES, M.A.P.H.I.
Mr. L. S. HUMPHREYS, M.A.P.H.I., (left July)
Mr. E. A. MASSEY, M.A.P.H.I. (appointed August)

Student Public Health Inspector:

Mr. B. R. JOHNSON (appointed August)

Meat Inspectors:

Mr. W. KIND
Mr. J. EATWELL

Clerical Staff:

Mrs. P. D. BIRKHEAD
Mrs. D. HAMMOND (left November)
Mrs. L. M. SMEDLEY (appointed November)
Mrs. R. A. DAVIS

Rodent Officer:

Mr. C. AVERY

Whelpley Hill Caravan Park Warden:

Mr. D. L. PULLAN

ARRANGEMENT OF THE REPORT

	Pages
<i>Section I: GENERAL AND VITAL STATISTICS</i>	11
<i>Section II: GENERAL PROVISION OF HEALTH SERVICES</i>	15
Hospital Services	
Laboratory Facilities	
Ambulance Services	
School Health Service	
Mental Health Service	
Occupational Therapy	
Radiography	
Proposed Health Centre	
Cervical Cytology	
Families with Problems	
Old People's Welfare Committees	
Chiltern's Samaritans	
Medical Comforts Depot	
Child Health Centres	
Midwifery and Home Nursing Service	
Health Visitors	
<i>Section III: NATIONAL ASSISTANCE ACTS, 1948-1951</i> Sections 47 and 50	24
<i>Section IV: PREVELANCE AND CONTROL OF INFECTIOUS DISEASES</i>	24
Cases notified	
<i>Immunization and Vaccination</i>	
Smallpox	
Tuberculosis	
Diphtheria	
Poliomyelitis	
Rubella	

	Pages
<i>Section V: SANITARY CIRCUMSTANCES OF THE AREA</i>	30
General Administration	
Council Properties	
Housing (Financial Provisions) Act, 1958.	
Housing Act, 1969	
Slum Clearance	
Caravans and Caravan Sites	
Water Supply	
Drainage and Sewerage	
Cesspool Emptying Service	
Refuse—collection and disposal	
Rodent Infestation and Destruction	
<i>Section VI: INSPECTION AND SUPERVISION OF FOOD</i>	39
Milk and Dairies (General) Regs., 1959	
Milk Sampling and Miscellaneous Sampling	
Food Hygiene (General) Regs. 1970	
Complaints of alleged unfit food	
Meat Inspection at Slaughterhouses	
Poultry Inspection	
Miscellaneous Acts	
<i>Section VII: FACTORIES ACT AND WATER SUPPLY</i>	44
<i>Appendix I</i> Factories Act, 1961	
<i>Appendix II</i> Water Supply—Results of Analyses	
<i>ANNUAL REPORT OF THE FAMILY PLANNING ASSOCIATION</i>	48

Public Health Department,
Council Offices,
P.O. Box 21,
Amersham,
Bucks.
HP7 ODL.
August, 1973.

Telephone: Amersham 4433

To: The Chairman and Councillors of the Amersham Rural District Council

LADIES AND GENTLEMEN,

With the kind of certainty which seems to flow from modern Parliamentary programmes, the National Health Service Reorganisation Bill will become an effective statute on 1st April, 1974.

As part of the unification process the office of Medical Officer of Health will cease and local district authorities will have made available to them the advice of a seconded Community Physician versed in environmental health expertise. As the new District Councils will become effective from the same day in April 1974 the occasion will not be quite so redolent of history as it might. There is still some time left; perhaps some of the health statistics from earlier years might be of interest and as next year's Annual Report will be the last to be presented to the Council for a complete year, it is hoped to do some research into the archives.

The simultaneous reorganisation of Local Government and the National Health Service is without doubt one of the few major upheavals undertaken outside war-time. Like a declaration of war there has to be general assent to a change of this magnitude and most health staff, who are doubly affected, will see the occasion as offering an opportunity and a challenge rather than a cause for discouragement or disappointment.

What of recent environmental trends?

We are seeing an industrial process in the countryside, a second industrial revolution with mechanization and sophistication of agriculture and animal husbandry so that the drift from the countryside has been accentuated rather than lessened. This is less obvious in the face of the reverse trend of escape from city to the green belt.

The report for 1968 alluded to the noisesome practice of "straw burning" during later summer months. This subject is again referred to as 1972 was a particularly troublesome year in this respect. The photograph on page 2 was taken within the District. The N.F.U. is said to be taking action in this matter but it remains to be seen if they can discipline their more indifferent and pyromanic

members. Quite apart from the aesthetic and broader environmental issues, the smoke haze produced cuts down the opportunity of individuals to form vitamin D from exposure to sunlight at a time when the strength of the ultra-violet rays is waning.

We do not subscribe to the view sometimes taken that health is difficult to define as, say, beauty. There is now, generally, agreement as to what are the optimum requirements for health and these are not subjective or ephemeral. We therefore view with reassurance and some satisfaction that District Health Departments are to continue after 1974. However the Arabs have a saying "bokra fel mish-mish" – tomorrow we shall have apricots. We need to see the fruits of present reorganisational labours before we can judge them.

"Hygiene" has been sold to the man-in-the-shop. Most foods are now wrapped to the extent where one needs a waste paper basket handy at the breakfast table to eat one's cereal, plus if possible a pair of scissors with the cutlery. Indeed, breakfast cereal manufacturers have much to answer for for a whole generation of children now tending to obesity. Cutting out breakfast is one of the easiest ways to slim, but advertisers' success has changed the pronunciation of the word "vitamin" to "vittermin" within the last two decades and made breakfast an essential meal.

Had the smoking and health campaign gone as well as it ought to have done by now we should not be showing the usual morbidity and mortality trends from lung cancer and other respiratory disease. Clearly better health has to be something you can buy, is well wrapped and contains semi-mystical constituents derived from recent scientific discoveries. The "safe cigarette" will probably have a place in the weaning part of this generation at least from the nicotine habit, not because of its scientific value but because this is the only economic way to release nearly half the population from the mental acrobatics they employ. Giving up would be easier to most smokers if they could find a substitute. In our spendthrift society if they do not buy "satisfaction" they will no doubt be less appreciative.

It is a matter of concern that the broader expenditure on preventive health, often requiring the individual's active participation and initiative, will shortly become swallowed up in one great impersonal health budget competing with very expensive sophisticated treatment. What room will there be for local experiment and innovation? Take the local V.D. Telephone Answering Service. Such matters might in future be dubbed "not within the policy", "not your responsibility", "you had no authority to speak to the press or public". Any Regional, Area and District organisation is bound to be hierarchical. Yet, it is part of the duty of all doctors to be free to teach and promote health education. It is a matter of concern that in future, health education will not be the responsibility of the Local Education Authorities, that health service will not be

immediately available to social workers in Social Services Departments, that neither they nor District Councils may have an obligation to consult on health matters. Indeed, many problems may not be thought of as health problems at all, yet turn out to be some form of illness. Infectious disease can, in its many disguises, masquerade as a multiplicity of social or emotional problems as any psychiatrist can say. For this reason alone it is vital that a medical presence is maintained within Environmental Health Departments and the services for children. Nor can be viewed, without disquiet, the use of non-medical advisers to such departments for their casework and placements.

B. H. BURNE

Medical Officer of Health

SECTION 1

GENERAL AND VITAL STATISTICS

1. GENERAL STATISTICS

**Population .....	.....	.....	.....	69,300
Area (acres) of district .....	.....	.....	.....	46,233
Number of habitable houses 1st April, 1972 .....	.....	.....	.....	22,118
Rateable value of area 1st April, 1972 .....	.....	.....	.....	£3,647,638
Net product of a penny rate 1972/73 (est.) .....	.....	.....	.....	£36,000

2. VITAL STATISTICS

(a) Live Births

	Males	Females	Total
Legitimate	430	424	854
Illegitimate	17	19	36
 Total live births.....	447	443	890
Crude birth rate per 1,000 population .....	.....	.....	12.8
*Corrected birth rate per 1,000 population (Comptability factor 1.07) .....	.....	.....	13.7
Illegitimate live births per cent of total live births .....	.....	.....	4.0

(b) Still Births

Still births per 1,000 live and still births .....	.....	7
Total live and still births .....	.....	896

(c) Deaths

Infant deaths (deaths under one year) .....	.....	9
Infant mortality rate per 1,000 live births .....	.....	10.0
Infant mortality rate per 1,000 legitimate live births .....	.....	9.0
Infant mortality rate per 1,000 illegitimate live births .....	.....	28.0
Neo-natal mortality rate (deaths under four weeks) per 1,000 total live births .....	.....	6.0
Early neo-natal mortality rate (deaths under one week) per 1,000 total live births .....	.....	6.0
Perinatal mortality rate (still births and deaths under one week combined) per 1,000 total live and still births .....	.....	12.0
Maternal deaths (including abortion) .....	.....	—
Maternal mortality rate per 1,000 live and still births .....	.....	—
Crude death rate per 1,000 population .....	.....	9.4
*Corrected death rate per 1,000 population (Comparability factor 1.01) .....	.....	9.5

*The corrected birth and death rates are those which are obtained when the crude local rates are adjusted to make allowance for the way in which the sex and age distribution of the local population differs from that of England and Wales.

**Population. The total estimated population of the three districts for which I am Medical Officer of Health is 101,830

CAUSES OF DEATH

Once again I echo the warning given in previous years that a very considerable part of the cause of death from diseases of the respiratory system, both from cancer and forms of infection, is contributed by smoking, particularly the smoking of cigarettes.

The National trends are, of course, seen better in the figures issued by the Chief Medical Officer for the Department of Health and Social Security as our local figures are liable to more fluctuation because, for statistical purposes, they are relatively small.

		<i>Males</i>	<i>Females</i>	<i>Total</i>
B4	Enteritis and Other Diarrohoeal Diseases	0	1	1
B5	Tuberculosis of Respiratory system	1	1	2
B19(1)	Malignant Neoplasm, Buccal Cavity etc.	0	1	1
B19(2)	Malignant Neoplasm, Oesophagus	3	3	6
B19(3)	Malignant Neoplasm, Stomach	..... 8	4	12
B19(4)	Malignant Neoplasm, Intestine	..... 8	10	18
B19(6)	Malignant Neoplasm, Lung, Bronchus	32	9	41
B19(7)	Malignant Neoplasm, Breast	..... 1	20	21
B19(8)	Malignant Neoplasm, Uterus	..... 0	2	2
B19(9)	Malignant Neoplasm, Prostate	..... 8	0	8
B19(10)	Leukaemia	..... 4	1	5
B19(11)	Other Malignant Neoplasms	..... 16	19	35
B20	Benign and unspecified Neoplasms	2	3	5
B21	Diabetes Mellitus	..... 2	2	4
B46(1)	Other Endocrine etc. Diseases	..... 2	1	3
B46(2)	Other Diseases of Blood, etc.	..... 1	0	1
B46(3)	Mental Disorders	..... 0	3	3
B46(4)	Multiple Sclerosis	..... 3	1	4
B46(5)	Other Diseases of Nervous System	4	6	10
B26	Chronic Rheumatic Heart Disease	6	6	12
B27	Hypertensive Disease	..... 3	4	7
B28	Ischaemic Heart Disease	..... 93	68	161
B29	Other Forms of Heart Disease	..... 13	16	29
B30	Cerebrovascular Disease	..... 32	54	86
B46(6)	Other Diseases of Circulatory System	14	6	20
B31	Influenza	..... 1	3	4
B32	Pneumonia	..... 23	27	50
B33(1)	Bronchitis and Emphysema	..... 10	8	18
B33(2)	Asthma	..... 1	1	2
B46(7)	Other Disease of Respiratory System	2	4	6
B34	Peptic Ulcer	..... 1	3	4
B36	Intestinal Obstruction and Hernia	0	2	2
B37	Cirrhosis of Liver	..... 1	4	5
B46(8)	Other Diseases of Digestive System	4	3	7
B38	Nephritis and Nephrosis	..... 1	3	4
B46(9)	Other Diseases, Genito-Urinary System	0	2	2
B46(11)	Diseases of Musculo-Skeletal System	4	1	5

B42	Congenital Anomalies	1	4	5
B43	Birth Injury, Difficult Labour, etc	1	0	1
B44	Other causes of Perinatal Mortality	1	0	1
B45	Symptoms and Ill Defined Conditions	2	0	2
BE47	Motor Vehicle Accidents	10	3	13
BE48	All other accidents	3	11	14
BE49	Suicide and Self-Inflicted Injuries	4	2	6
BE50	All other External Causes	1	1	2
		—	—	—
		327	323	650
		—	—	—

(The figures in the left hand column refer to the International Statistical Classification of Diseases, Injuries and Causes of Death, based on recommendations of the Eight Revision Conference, 1965, and adopted by the Nineteenth World Health Assembly).

COUNTY of BUCKINGHAM - Population Birth and Mortality Rates for the Year 1972

District	*Population Census 1971	Registrar-General's estimated population mid 1972	Births		Deaths	
			Number	Rate per 1,000 population	Number	Rate per 1,000 population
URBAN						
Aylesbury	40,569	40,860	635	8.2
Beaconsfield	11,875	11,800	113	6.9
Bletchley	30,627	31,990	701	6.3
Buckingham	5,076	5,200	78	9.0
Chesham	20,447	20,730	403	9.1
Eton	3,956	4,880	37	7.0
High Wycombe	59,340	60,510	1,045	7.0
Marlow	11,749	11,720	216	17.3
Newport Pagnell	6,334	6,660	133	18.4
Slough	87,075	88,420	1,538	20.0
Wolverton	13,821	13,810	223	17.4
TOTAL URBAN	290,869	296,580	5,122	17.3
RURAL						
Amersham	68,496	69,300	890	12.8
Aylesbury	38,552	38,450	583	15.2
Buckingham	9,557	10,190	152	14.9
Eton	72,051	73,000	838	11.5
Newport Pagnell	15,841	16,430	258	15.7
Wing	10,754	10,920	207	19.0
Winslow	10,127	10,370	167	16.1
Wycombe	71,312	73,050	1,173	16.1
TOTAL RURAL	296,690	301,710	4,268	14.1
TOTAL COUNTY	587,559	598,290	9,390	15.7
ENGLAND AND WALES			49,028,900	725,405	14.8	591,907
						12.1

*Adjusted totals - Figures in 1971 report were provisional

SECTION II

GENERAL PROVISION OF HEALTH SERVICE

Hospital Services

The Amersham Rural District is situated in the area of the High Wycombe and District Management Committee of the Oxford Regional Hospital Board. The Medical Officer of Health is a member of the Amersham House Committee and the Medical Advisory Committee. The Chief Public Health Inspector is also a member of the Amersham House Committee.

Hospitals Available for the District

Pulmonary Tuberculosis	— Berks and Bucks Joint Sanitorium, Peppard Common
General	— Chesham Cottage Hospital
"	— Amersham General Hospital
"	— Royal Buckinghamshire Hospital, Aylesbury
"	— Wycombe General Hospital, High Wycombe
"	— Chalfonts and Gerrards Cross Hospital
Infectious Diseases	— Aylesbury Isolation Hospital, Stoke Mandeville
Psychiatric	— St. John's Hospital, Stone, Ayles- bury
Maternity	— Stone Maternity Home
	— Maternity Unit Amersham General Hospital
Subnormal	— Borocourt Hospital, Nr. Reading Berks. Manor House Hospital, Aylesbury.
Accidents and Emergency	— 24-hours service Wycombe General Hospital
	— 9 a.m. – 5 p.m. (weekdays only) Amersham General Hospital

During the year the Medical Officer continued to serve on the Control of Infection Sub-Committee, formed to advise the Group Hospitals on measures to reduce the incidence of infection and cross-infection in hospitals.

The Medical Officer also continued to serve on the Postgraduate Education Committee.

Laboratory Facilities

Bacteriological laboratory facilities are provided by the Public Health Laboratories situated at Oxford, Luton, Watford and the Pathology Laboratory at Amersham General Hospital for the

examination of certain specimens for screening of food handlers.

Samples of water and sewage effluent for chemical analysis are sent to the Public Analyst, London Borough of Southwark.

Ambulance Services

These services are administered by the County Health Authority. The Amersham R.D.C. area is served by the Amersham and High Wycombe stations. (Telephone numbers Amersham 7154 and High Wycombe 21871, respectively).

Education Act, 1944 – School Health Service

The work of the School Health Service is administered from the offices at 53, High Street, Amersham (Telephone: Amersham 5051). The Medical Officer has the responsibility for this service in Amersham and Chesham. The report of the Divisional School Medical Officer is contained in the Annual Report of the Principal School Medical Officer. The Medical Officer of Health is Medical Officer to Alfriston Special School; Stony Dean Special School, Amersham, the Partially-hearing Unit at Woodside School, Amersham, the Home Group for Physically Handicapped Children, Heritage House Special School, Nalders Road, Chesham, and Prestwood Lodge Special School.

Mental Health Act, 1959

Mental Welfare Officers and Social Workers are available from the office of the Area Social Services Department, 32, Octagon Parade, High Wycombe, (Telephone: High Wycombe 32861) and out of working hours via the Ambulance Service.

There is a purpose-built Senior Training Centre, the Nalders Road Industrial Unit, Chesham.

The Medical Officer of Health is approved by the County Mental Health Authority to recommend action under various sections of the Mental Health Act.

Occupational Therapy

Adapted premises at 122, High Street, Chesham (Telephone Chesham 71882) is used as an occupational therapy workshop for 5 days each week, between 10 a.m. – 4.00 p.m. Local patients make their own way there and others are brought by ambulance and taxi services.

Many patients in the district are being referred for advice on aids for daily living and a considerable increasing number of cases are being referred by General Practitioners. The domiciliary service is, of course, still available on medical recommendation.

Radiography

Certain cases are referred by the Medical Officer of Health to the hospital, free of cost, depending on the type of service required.

Mobile Chest X-Ray Service

In his Annual Report for the year, the Medical Director stated that for the whole region the incidence of tuberculous lesions requiring treatment remained virtually unchanged. Eleven of the

twenty-nine cases concerned immigrants. More than half the cases, all in Asians, arose in High Wycombe. The Medical Director proposed to conduct a special survey of Asian immigrants during 1973.

The nearest site for this service is High Wycombe where, 1,556 cases were examined during the year, yielding 5 cases of active T.B. and 7 cases of Lung Cancer.

National Health Service Act, 1946 – Section 21

Proposed Health Centre for Amersham

Negotiations have continued throughout the year in regard to the terms of lease for the site and the building of a Health Centre. The proposed Health Centre will include facilities for a number of General Practitioners and accommodation for clinical treatment and counselling services associated with the School Health service. A search is still being made for a suitable site for a new ambulance station.

Cervical Cytology Clinics

These are held on alternate Monday mornings at Amersham Hospital in the Outpatients' Department and are run by the local Health Authority. Application cards are available from General Practitioners and Health Visitors, or direct from the Health Visitors' Office, Germain Street Clinic, Chesham (mornings only) telephone. number Chesham 3991 and from the Public Health Department.

The Family Planning Association also provides this service Please see Appendix to this report.

Families with problems

The arrangements for these have been modified by the setting up of Social Service Departments. As ad hoc Chairman of the Conference of professional workers in this field I wish to thank the County Health Visitors and all social workers both of voluntary agencies and of statutory services for their helpful co-operation. I should also particularly like to thank the Housing Manager's and Treasurer's Departments for their forbearance towards our sometimes difficult clients, thus preventing the break-up of families or avoiding their homelessness. A number of informal conferences have been held in regard to children and their families known to the Child Health Services locally.

Old People's Welfare Committees

The following reports have been received from the various Old People's Welfare Committees in the district:-

Prestwood and Great Kinghill

Hon. Secretary: R. C. Franklin, Connaught Lodge, Nairdwood Lane, Prestwood Great Missenden. (Tel: G.M. 2973).

1972 provided a challenge. The expenditure on aid increased due to the higher cost of fuel distributed to a larger number of homes and helping with a considerable variety of items for those in need. The Committee's income was less than in the previous year

as some donations were not repeated. However, as it is not the intention to reduce the basic allocation of fuel, fund raising activities were extended.

The collection of groceries was a great success, due to the splendid generosity of many shoppers, enabling the distribution of over 100 parcels shortly before Christmas. A number of entertainments were arranged for which transport was provided and requests for help in visiting hospitals, etc. continued to keep drivers busy.

Amersham and District

Hon. Secretary: Mrs. J. Ellis, Swinton, 144, White Lion Road, Little Chalfont. (Tel: Little Chalfont 2856).

The year 1972 was as good as any previous year, and better than most in the fulfilment of the Committee's objects and the provision of the necessary funds. In general the aim is to co-ordinate the activities of the Clubs, the W.R.V.S. and other organisations in their help, in various ways, to elderly people in the area. The usual direct services were continued, namely, chiropody, visiting, afternoon drives and teas in the summertime and, in co-operation with the Rotary and Lions Clubs, the distribution of Christmas parcels, this year a record number of 421 parcels. The Committee expressed gratitude to each of the many people who had been most kind and generous in their practical and financial assistance.

Gerrards Cross and Chalfonts

Hon. Secretary: Mrs. P. V. Durtnal, 39, Latchmoor Way, Gerrards Cross (Telephone- G.X. 84379).

Due to the generous grant given by the Council the two original chiropody clinics run smoothly throughout the year and in July, to meet the growing demand, a third clinic was opened at Rock House, Gold Hill, and since then the length of the sessions was increased thus enabling more patients to be treated. During the fourteen months that the clinics had operated, 166 persons had been treated regularly, of whom about 150 were living within the Rural District.

The basic activities of visiting, distributing Christmas parcels, coach outings and holidays continued, as well as the provision of help towards fuel, T.V. sets and licences.

Great Missenden and District

Hon. Secretary: S. W. Surry, "Holmleigh", London Road, Great Missenden. (Tel: Gt. Missenden 3589).

The "Thursday Club" continued to be popular. Lunches were provided for about 40 members on Thursdays in the Baptist Church Hall. The chiropody service continued and occasional jumble sales, outings and entertainments were arranged. The Visiting Committee of 14 members covered a wide area, and articles for loan, such as blankets, electric fires, carpet sweepers, etc. were available. Distributions of coal were extended, two deliveries having been made to 40 elderly people.

The Committee arranged and partly financed a holiday for an

elderly couple, which was such a success that they anticipate repeating this venture for two couples in 1973.

The Autumn Fair was held in November in the Baptist Hall.

Chilterns Samaritans

The following report has been received from the Chilterns Samaritans – Hon. Secretary: Abby Warburton, “Foxboro”, 149, Station Road, Amersham. (Telephone: Amersham 5000).

1972 was an extremely busy period for the Chilterns Samaritans. During the year 1,002 new clients phoned for help as compared with 684 in 1971. There was an increasing awareness of the Samaritan organisation by the public – no doubt the T.V. programme “The Befrienders” had much to do with this.

Clients’ problems covered a wide range and it is interesting that statistical analysis shows that the largest category were those with marital and sexual problems: the two cannot really be separated, and when one goes more deeply into the client’s difficulty one generally finds the same element, a sense of inadequacy or guilt about sex. It is a frightful commentary on life in our society that whereas we have gained scientific knowledge that can put a man on the moon we understand so little about so important a part of our human nature. The guilt can drive many people to the point of despair or suicide.

The Samaritans are one of the few groups to whom the sexual casualty can turn for help without fear of condemnation.

There was a steady flow of people offering their services as Samaritan volunteers, and a great deal of thought was given to their selection and preparation. Sometimes preparation can be painful to some potential volunteers, so it was not surprising that probably only 10% of those who initially applied for training reached the stage of becoming a Samaritan volunteer.

During the year 149, Station Road, Amersham was purchased as a new centre. The house still has to be paid for, and a great deal of work is being done by the “Friends of the Samaritans” and the Fund Raising Committee to this end. The Samaritans are very grateful for donations received, some of which were anonymous.

Dr. Helen Davidson Medical Comforts Depot

Part of the Helen Davidson Memorial Fund was devoted to the equipping of a medical comforts depot in the St. John Ambulance H.Q.s., Chichester Row, Amersham. The depot, (known as the Dr. Helen Davidson Room) was opened, in 1969, and the hours of opening are as follows:

Tuesdays	—	2 to 3.30
Thursdays	—	8 to 10 p.m.

Enquiries may be made at other times at 92 Plantation Road, Amersham, or over the telephone at Amerhsam 6721 or 7788. These times are arranged in conjunction with the opening times of the British Red Cross Medical Comforts Depot. in Chiltern Avenue,

Amersham, which are as follows:

Mondays	—	6.30 to 7.30 p.m.
Wednesdays	—	2 to 3 p.m.
Fridays	—	2 to 3 p.m.

The list of items available for nursing patients at home, include the following, and general practitioners were advised that these facilities should be brought to the attention of their patients who may be in need:-

Wheelchairs	Air rings	Rubber bath mats
Commodes	Backrests	Draw sheets
Bed cradles	Feeding cups	Mackintosh Sheets
Bed blocks	Bath seats	Cellular blankets
Bedpans	Bath rails	Fracture boards
Urinals	Raised toilet seats	Self-lifting seats Hoist

CHILD HEALTH CENTRES

Name	Place	Open	Medical Officer Attends
Amersham on the Hill	St. John's Ambulance Hall, Chiltern Avenue Baptist Hall	every Tuesday	every Tuesday
Amersham (Old Town)	Baptist Hall	2nd and 4th Tuesday	2nd and 4th Tuesday
Chalfont St. Giles	Scout Hall	every Monday	1st and 3rd Monday
Chalfont St. Peter	Community Centre	every Friday	1st and 3rd Friday
Chartridge and The Lee	Village Hall, Chartridge	3rd Thursday	3rd Thursday
Cholesbury	Village Hall	2nd and 4th Thursday	4th Thursday
Great Missenden	Baptist Church Hall	2nd Monday	2nd Monday
Holmer Green	Village Centre	every Wednesday	every Wednesday
Little Chalfont	Little Chalfont Hall	1st and 3rd Monday	1st and 3rd Monday
Prestwood	Village Hall	2nd and 4th Wednesday	2nd and 4th Wednesday
Ballinger	Village Hall	1st Thursday	1st Thursday

All the above sessions are held between 2 – 4 p.m.

DISTRICT NURSES, MIDWIVES AND HEALTH VISITORS WORKING IN THE AMERSHAM RURAL DISTRICT

GROUP PRACTICE	HEALTH VISITORS	HEALTH ASSISTANTS	OFFICE ADDRESS AND TEL. NO.	GENERAL AND MALE NURSE COVER	MIDWIFE OR DISTRICT NURSE /MIDWIFE
Dr. K. R. V. Argles Dr. D. W. Kay Dr. J. B. Rolt	Mrs. B. Whiting Mrs. E. James Miss A. Neal Mrs. M. F. Fennimore	Mrs. E. Pegley	Ambulance Station Chiltern Avenue, Amersham Tel. Amersham 3112 and 4582	Mrs. Schofield 535 Waterside, Chesham Tel. Chesham 71308	Miss B. McVeigh, 76, Chestnut Lane, Amersham Tel. Amer. 21176
Dr. T. B. W. Phillips Dr. A. E. R. Gibbs Dr. D. A. Haydon					
Dr. M. O. Brigstocke Dr. T. J. Hall	Mrs. L. Stewart		As above	Mrs. Aylott, The Nook, 4, New Rd., Amersham Tel. Amer 5237	Mrs. R. Versi, "Cranmere", Bellingdon, Chesham Tel. Ches 3100
Dr. V. L. Redman	Mrs. M. Fennimore		As above	Mr. J. Prashad, 8 Nashleigh Hill, Chesham Tel. Chesham 72218	Mrs. G. Hoskins, 33 Woodside Ave., Chesham Bois Tel. Amer 6258
All Practices in Amersham	Mrs. Appleton				Mrs. H. Clitheroe, 17 Chessfield Park, Little Chalfont Tel. Lit Chal 3727

DISTRICT NURSES, MIDWIVES, AND HEALTH VISITORS ETC. (cont)

Dr. H. T. S. Wise Dr. R. E. Holmes Dr. G. B. Middle Dr. R. A. Fabre	Mrs. E. North Mrs. L. Tracey	Mrs. H. Gillibrand	Ivy House, Red Lion Street, Chesham Tel. Ches 71952	Mrs. S. Ginger, St. Ives, 199 Chartridge Lane, Chesham Tel. Chesham 5126	Miss M. Marston, 367 Chartridge Lane, Chesham. Tel. Chesham 2762
Dr. P. Howe Dr. S. A. J. Hutt	Mrs. A. May	Mrs. V. Wilkinson	School Clinic Germain Street, Chesham Tel. Chesham 3991		Miss E. Johnson, 7, First Avenue, Amersham Tel. Amersham 6374
Dr. S. O. Widman Dr. J. J. McMullan Dr. S. K. Heywood Dr. D. W. Harley	Miss M. Kynaston Miss Attwater	Mrs. B. Hymers	School Clinic Germain Street, Chesham Tel. Ches 3991		Miss M. Bly, Shenley Cottage, Ley Hill, Chesham Tel. Chesham 2838
All Practices in Chesham					Mrs. Hutchinson, "Kempsie", 9, Albion Road, Chalfont St. Giles Tel. Ch. St. G. 2221
					Mr. J. Jackson, 537, Waterside, Chesham Tel. Chesham 71309 Mrs. M. Knowles, 44 Nalders Road, Chesham Tel. Chesham 71339

Dr. M. G. Webber Dr. W. S. Ogden Dr. R. H. D. Miles Dr. J. C. Cosgrove	Mrs. H. Jenks Miss M. Cummings Mrs. J. Brian	Mrs. Walker Mrs. M. Davies	c/o Stone Maternity Home, Ch. St. Giles Tel. C.S.G. 4177 Ambulance Station High Street, Chalfont St. Peter Tel. Gerrards X 85911	Miss M. Wright, 1 Pennington Road, Chalfont St. Peter Tel. Gerrards X 84030 Miss M. Inglis, District Nurse Flat Over Library, High Street, Chalfont St. Giles Tel. C.S.G. 3049	Miss M. Inglis, District Nurse Flat Over Library, High Street, Chalfont St. Giles Tel. C.S.G. 3049
Dr. J. M. Brown Dr. J. A. Wright Dr. G. F. Pye Dr. A. E. Welch	Miss O. Davies Miss F. Willes Mrs. L. Reeve	Mrs. J. Sperry	As above	Miss J. Young, 3 Pennington Road, Chalfont St. Peter. Tel. Gerrards X 84031 Miss J. Morris, 18 Gaviots Close, Gerrards Cross Tel. Gerrards X 84405 Miss E. McIlwaine, 20 Gaviots Close, Gerrards Cross. Tel. Gerrards X 84202 Shared Help: Mrs. Troughton, 125 Tudor Way, Rickmansworth Tel. Rick. 79096 (South Bucks based)	Miss J. Young, 3 Pennington Road, Chalfont St. Peter. Tel. Gerrards X 84031 Miss J. Morris, 18 Gaviots Close, Gerrards Cross Tel. Gerrards X 84405 Miss E. McIlwaine, 20 Gaviots Close, Gerrards Cross. Tel. Gerrards X 84202 Shared Help: Mrs. Troughton, 125 Tudor Way, Rickmansworth Tel. Rick. 79096 (South Bucks based)
Dr. D. L. Hall Dr. A. G. Creighton					

SECTION III

NATIONAL ASSISTANCE ACTS, 1948-51

Section 47

Under this section when persons:-

- (a) are suffering from grave chronic disease or being aged, infirm or physically incapacitated are living in insanitary conditions, and
- (b) are unable to devote to themselves and are not receiving from other persons proper care and attention the local authority may apply to a court of summary jurisdiction or to a Justice of the Peace for an order to remove the person to a suitable place.

It was not necessary to take action under this section during the year.

In general it is felt preferable for persons of good mental state to be persuaded to accept more suitable care voluntarily. Most patients and relatives will accept the combined advice of both general practitioner and medical officer of health and can see the advantages of informal admissions and discharges.

Section 50

Under this section the District Council has the duty to arrange for the burial of any person who has died in their area, if no suitable arrangements for the disposal of the body are being made. (Where the deceased has an estate the costs are recoverable).

It was not necessary to take action under this section during the year.

SECTION IV

PREVELANCE AND CONTROL OF INFECTIOUS DISEASES

Notifications of Infectious Diseases

Cases of infectious diseases notified during the year are given below, together with comparative figures for 1971.

	Cases		Notified
	1971	1972	
Measles	80	158	
Whooping Cough	14	4	
Scarlet Fever	21	19	
Food Poisoning	31	43	
Dysentery	1	2	
Infective Jaundice	25	5	
Tuberculosis	5	6	
Pulmonary	—	2	
Non-Pulmonary			

Analysis of Notifiable Disease in Age Groups:-

	Total cases under of all ages	Cases Notified								
		1	2	3	4	5-9	10-14	15-24	25	
Whooping Cough	4	—	—	—	1	—	2	—	1	—
Measles ..	158	7	7	10	9	21	87	15	2	—
Scarlet Fever	19	—	2	4	1	6	2	2	2	—

Measles

Unfortunately many of the children having measles had not been protected against this disease by vaccination. Whilst the "herd-immunity" is less than about 85%, even some of those who have been protected may pick-up a mild form of this infection.

Whooping Cough

In recent years there has been a decrease in the number of cases notified and as this is a potential cause of damage to the lungs in later life, this is most gratifying.

Infective Jaundice

Of the 5 cases notified, only one of them was in respect of a child. The Public Health Inspector visits each case, giving advice and leaving literature concerning the disease.

It is important that the Public Health Department is informed if a case of jaundice occurs in a blood donor or one of his relations.

Food Poisoning

Of the 43 cases notified, 27 were sporadic cases and 16 were family outbreaks. Upon bacteriological examination 8 cases were typed as *Salmonella Typhimurium*, one was typed as *Salmonella Agona* and 2 others were typed as *Salmonella Java*. The causes in the other cases were untraced bacteriologically.

Public Health Act, 1961

Infectious Contact – Payment of Wages

A close contact of one of the above cases of salmonella infection was advised not to continue his employment until a negative bacteriological report had been obtained. In accordance with section 41 of the above Act, the Treasurer was authorised to make the appropriate payment in respect of the loss of wages incurred by the contact as a result of suspension from his employment.

Tuberculosis

The following table shows the new cases of tuberculosis and the deaths from the disease, arranged in age groups:-

Age Groups in Years	New Cases				Deaths			
	Respiratory		Non- Respiratory		Respiratory		Non- Respiratory	
	M	F	M	F	M	F	M	F
Under 1	—	—	—	—	—	—	—	—
1	—	—	—	—	—	—	—	—
5	—	—	—	—	—	—	—	—
15	—	1	—	—	—	—	—	—
25	—	—	—	1	—	—	—	—
35	1	—	—	—	—	—	—	—
45	—	—	—	—	1	—	—	—
55	3	—	1	—	—	1	—	—
65 and over	1	—	—	—	—	—	—	—
Total	5	1	1	1	1	1	—	—

Incidence of Venereal Diseases

Figures are now available for the incidence of Syphilis, Gonorrhoea and other Venereal conditions diagnosed at Wycombe General Hospital clinic. This information has been obtained by the County Medical Officer and, of course, applies to patients whose home addresses may be anywhere, and not necessarily in this District Council's area.

The following are the details from the various treatment centres:-

Hospital		Syphilis		Gonorrhoea		Other sexually transmitted diseases	
	1972	1971	1972	1971	1972	1971	
Royal Buckinghamshire Hospital (Aylesbury) ..	4	—	35	31	205	207	
Wycombe General Hospital ..	7	14	41	63	480	435	
Bedford General Hospital ..	—	—	7	3	25	7	
Hillingdon Hospital ..	—	—	6	10	98	84	
King Edward VII Hospital Windsor ..	7	9	96	74	435	417	
Northampton General Hospital ..	—	—	3	2	22	18	
St. Bartholomew's Hospital ..	1	—	4	1	18	17	
St. Thomas's Hospital ..	—	—	—	1	17	34	
Total	19	23	192	185	1,300	1,219	

The Council has for several years been concerned that information on health matters should be freely available locally. Although there is no undue concern, it was felt more should be done with regard to publicity on the Health Service available to those in need. To this end, in conjunction with other Councils, leaflets were overprinted, posters displayed in Council premises and a Telephone Answering Service instituted to give the times of local clinics and general information on the subject of Venereal Diseases. (Telephone number: High Wycombe 37773).

IMMUNIZATIONS AND VACCINATIONS

(a) Smallpox

It is not now usual to give smallpox vaccination at the clinics to infants during the second year of life. The incidence of side effects from vaccination is lowest at this age, but unless there is a specific reason (e.g. travel abroad) risk of infection in the United Kingdom is regarded as very slight now.

(b) Tuberculosis

B.C.G. vaccination at about the age of 12 to 13 years and all immigrant school children is provided by the School Health Service. In the Amersham and Chesham Division it is pleasing to note that once again there was an excellent response from parents.

The B.C.G. vaccination is preceded by a tuberculin test which indicates whether the individual has in the past been infected with tuberculosis. Most of these infections are very mild and cause no definite symptoms. The number reacting to this test is a measure of the past exposure of these children to tuberculosis and in this context it is interesting to note the following figures:-

<i>Year</i>	<i>Tuberculin Test Positive (excluding those reacting due to previous B.C.G. Vaccination)</i>
1962	3.6%
1972	4.77%

Those children who react strongly to this test are later referred to the Chest Physician for further consideration and possibly radiological screening of the chest.

(c) Diphtheria

No cases of diphtheria were notified. This is an infection which is highly dangerous and liable to recur when the general state of immunity of the population falls too low. Protection is usually given together with tetanus vaccine or tenanus and whooping cough vaccine during the first few months of life and again on entry to school at five years of age.

(d) Poliomyelitis

Vaccination against polio may now be carried out orally at the same time as the injections mentioned above, i.e. about six months and again at five years of age. Oral polio vaccine produces a better level of immunity on the whole than that given by injected polio vaccine.

(e) Rubella

Vaccination against German Measles became possible at the end of 1970 following the granting of a licence for the manufacture of the vaccine to be made available to 12-year-old and 13-year-old girls.

(f) Other Infectious Diseases

Where the opinion of the Medical Officer of Health warrants it on epidemiological grounds vaccination for other infectious diseases (such as Anthrax) is available upon consultation.

Influenza Vaccine has been available to Council staff during the autumn.

DIPHTHERIA, TETANUS, PERTUSSIS, POLIOMYELITIS, MEASLES

Year of Birth	PRIMARY				RE-INFORCING				
	Diphtheria/Tetanus	Tetanus	Triple	Polio	Measles	Diphtheria/Tetanus	Triple	Polio	Measles
1972	1	—	24	24	—	—	—	—	—
1971	5	—	734	741	632	1	—	4	4
1970	2	—	66	68	203	—	1	6	5
1969	—	—	7	7	30	2	—	3	5
1968-65	4	—	3	1	20	878	15	98	227
Others	2	—	—	—	—	49	122	4	—
Total	14	—	834	841	885	930	138	115	241

SECTION V

SANITARY CIRCUMSTANCES OF THE AREA THE CONTRIBUTION OF THE CHIEF PUBLIC HEALTH INSPECTOR

At the June examinations of the Public Health Inspectors' Education Board our Student Public Health Inspector was successful in obtaining his diploma and was appointed to a vacancy as an Additional Public Health Inspector which arose in August. One of the clerical staff resigned and was replaced and a Student Public Health Inspector was appointed.

The Joint Committee appointed to make as much preparation as possible for the take-over by the Chiltern District Council on the 1st April 1974, was very active during the year. Towards the end of the year a suggestion was made for the establishment of a Department of Environmental Services to combine the functions and interests of the Engineer and Surveyor's Department and the Public Health Department. This suggestion was not acceptable and early in 1973 the Joint Committee recommended the establishment of a separate department to administer the environmental health functions under an officer with direct access to the Chief Executive and the Council.

The introduction of the Deposit of Poisonous Waste Act, 1972 was followed by a considerable amount of activity by industrialists to ensure that they did not contravene the provisions of the Act. Only one tip in the district was used for the deposit of these materials but after a relatively short time the Thames Conservancy Board made it clear that they would not consider this tip suitable for the deposit of materials other than innocuous waste.

An approach was made to the Clerk to the Licensing Magistrates with a view to soliciting his co-operation in getting improvements carried out to the sanitary accommodation of a number of hotels and public houses in the district. A survey was carried out and at the request of the clerk to the Licensing Magistrates a list of the more unsatisfactory hotels and inns was submitted to him for circulation to the visiting Magistrates.

SUMMARY OF INSPECTIONS

General Sanitation

Water Supply .....	.....	.....	.....	.....	63
Drainage .....	.....	.....	.....	.....	377
Piggeries .....	.....	.....	.....	.....	22
Moveable Dwellings .....	.....	.....	.....	.....	415
Vermin .....	.....	.....	.....	.....	37
Factories (Power) .....	.....	.....	.....	.....	192
Factories (Non Power) .....	.....	.....	.....	.....	11
Outworkers .....	.....	.....	.....	.....	10
Refuse Collection/Disposal .....	.....	.....	.....	.....	210
Public Conveniences .....	.....	.....	.....	.....	17

Clean Air Act .....	.....	.....	.....	.....	108
Hairdressers .....	.....	.....	.....	.....	26
Schools .....	.....	.....	.....	.....	37
Offices, Shops and Railway Premises .....	.....	.....	.....	.....	420
Pet Animal Shops and Animal Boarding Establishments .....	.....	.....	.....	.....	36
Miscellaneous .....	.....	.....	.....	.....	240
					— 2,221

Housing

House Inspections (Public Health Act) .....	.....	.....	.....	133
House Inspections (Public Health Act) Revisits .....	.....	.....	.....	156
House Inspections (Housing Act) .....	.....	.....	.....	257
House Inspections (Housing Act) Revisits .....	.....	.....	.....	313
Housing Applications .....	.....	.....	.....	201
Improvement Grants .....	.....	.....	.....	1038
Rent Acts .....	.....	.....	.....	53
Miscellaneous .....	.....	.....	.....	445
				— 2,596

Infectious Diseases .....	.....	.....	.....	137
				— 137

Meat and Food Inspection

Visits to Slaughterhouses .....	.....	.....	.....	1192
Unsound Food Visits .....	.....	.....	.....	218
Food Preparing Premises .....	.....	.....	.....	125
Food Hygiene Visits (Retailers) .....	.....	.....	.....	342
Food Hygiene Visits (Cafes, Hotels, Schools) .....	.....	.....	.....	174
Dairies .....	.....	.....	.....	16
Section 16 Food and Drugs Act .....	.....	.....	.....	4
Licensed Premises .....	.....	.....	.....	138
Miscellaneous .....	.....	.....	.....	83
				— 2,292

Visits in Connection with Sampling

Milk .....	.....	.....	.....	5
Water .....	.....	.....	.....	147
Ice-Cream .....	.....	.....	.....	4
Swabs .....	.....	.....	.....	73
Faeces .....	.....	.....	.....	19
Food including meat products .....	.....	.....	.....	39
				— 287

Petroleum Acts/Regulations .....	.....	.....	.....	228
				— 228
				— 7,761

SUMMARY OF NOTICES SERVED

Public Health and Housing Acts

The day-to-day complaints under the above Acts were, in the main, dealt with by informal action. Of the 70 statutory notices

listed below 55 were in respect of a defective private sewer serving forty-one properties, all of which were complied with. Below is a summary of the notices served during the year:-,

<i>Informal Notices</i>		<i>Statutory Notices</i>	
Served .....	..... 10	Served .....	..... 70
Complied with .....	..... 7	Complied with .....	..... 69

LOCAL AUTHORITY HOUSING

The number of properties shown below, controlled by the Council at the end of December 1972 was 3,258 compared with December 1971 when it was 3,186. The range of properties is as follows:-

	<i>Dec. 1971</i>	<i>Dec. 1972</i>
Pre-war Council Houses	671	648
Post-war Council Houses	2,469	2,564
Prefabricated Bungalows	46	46
	3,186	3,258

The reduction in the number of pre-war Council houses from 671 in 1971 to 648 in 1972 was due to the Council's policy of selling Council houses.

At the 31st December, there were approximately 1,000 applicants on the Council's Housing list.

Housing (Financial Provisions) Act, 1958 and Housing Act, 1969 Discretionary Grants

A further 124 formal Certificates of Approval were issued to applicants for improvement grants for the improvement of 146 dwellings and the total amount of grant offered was £48,637.

A summary of the applications approved since the inception of the provisions is given below:-

<i>Years</i>	<i>Applications approved</i>	<i>Total Grants</i>
1950 to 1955	114	£31,416
1956 to 1960	261	£66,391
1961 to 1965	135	£43,570
1966 to 1970	180	£60,728
1971	99	£34,847
1972	124	£48,637

25% more applications were approved than in 1971, due to the greater incentives contained in the Housing Act, 1969.

Standard Grants

During 1972, 11 grants were approved for the improvement of 12 dwellings the maximum total approved amounting to £1,531.

In February, the Public Health Committee instructed the Chief Public Health Inspector to report on the implementation of the Improvement Grant provisions and the Council's present policy.

A full report was given, as a result of which the Council was recommended not to alter the present policy and that there be no discrimination against any applicant on the grounds of his financial status.

Summary of Qualification Certificates

No. of certificates of provisional approval issued	6
No. of Qualification Certificates issued	64
No. of Qualification Certificates refused	3

Slum Clearance

Three dwellings were demolished, seven were closed and ten other dwellings were reported as being unfit within the meaning of the Housing Act, 1957, and not capable of being made fit at reasonable expense. One undertaking was accepted. Three demolition orders were revoked and one closing order was determined following the carrying out of extensive works of repair and improvement, which had the effect of securing the fitness of the dwellings.

During the year the areas of 37/47, High Street, Great Missenden and 19/29, Plantation Road, Amersham were declared Clearance Areas. Clearance Orders and Compulsory Purchase Orders were made and confirmed by the Department of the Environment. A further area, 12/18, Orchard Road, Seer Green, was declared a Clearance Area and a Clearance Order was made and confirmed by the Department of the Environment.

Following the issue of circular 50/72 by the Department of the Environment a survey of the housing conditions in the district was carried out and the following information was submitted to the Department of the Environment:-

Estimates of condition of Housing Stock in Mid 1972	Number of dwellings	
	<i>Owned by local authority or new town</i>	<i>Other ownership</i>
<i>Unfit dwellings (a)</i>		
1. In areas already declared under Part III Housing Act 1957	Nil	4
2. In other areas to be declared under Part III Housing Act 1957	Nil	Nil
3. Not in Part III areas	Nil	48
4. Total of unfit dwellings (items 1 plus 2 plus 3)	Nil	52
<i>Dwellings not unfit (a)</i>		
5. Up to 12 point standard	3,245	18,320
6. Capable of improvement to 12 point standard	12	489
7. Not capable of improvement to 12 point standard	Nil	Nil
<i>Total dwellings in the area (items 4 plus 5 plus 6 plus 7)</i>	3,257	18,861

It is anticipated that the unfit houses will be dealt with within a period of three or four years. Regarding the properties that are capable of being brought up to the 12 point standard, the owners are being contacted either by personal interview or letter and offered advice on the availability of improvement grants for bringing the properties up to a modern standard of fitness and amenity.

Caravan Sites and Control of Development Act, 1960. The Caravan Sites Act, 1968

At the 31st December the number of site licences issued and current under the above Acts was 35 and all the licences are for permanent residence, with the exception of one which is for holiday purposes. The majority of these site licences are for one caravan, but the total number of caravans on the 35 sites is 206 of which 160 are on three multiple sites.

Legal proceedings were taken in respect of land which was being used as a caravan site but for which planning permission and a site licence had not been granted. The defendant was convicted and fined £150 plus £10 advocate's fee.

The problem of gypsies and other itinerant travellers parking on roadside verges worsened and caused considerable concern to the Council. The Council requested a report on the position and in my report I referred to a letter from the County Surveyor in which he stated that both his Council and other local authorities affected have been concerned for years over the nuisance associated with itinerant camps on highway verges and he expressed the opinion that the present highway legislation is totally ineffective in dealing with the problem.

The Council was also advised that a spokesman for the Government had said that "moving people off one unauthorised site and leaving them to find another is no solution to the human and social problems involved". The provision of a site for this type of caravanner would to some extent alleviate the problem and some further progress was made by the County Council in establishing such a site. Only when the County Council provides sufficient sites to accommodate all the gypsies which normally resort to the County, will a position be reached when application can be made to the Department of the Environment for designation of the area. When an area has been designated an offence is committed by any gypsy who stations a caravan for any residential purpose on any land which is in the boundaries of the highway.

The Council's own site at Whelpley Hill, where there are 94 standings, continued to be well maintained. Vacancies, as they arise, are filled in accordance with a points' scheme and during the year the number of applicants on the waiting list continued to increase. In order to overcome the contravention of the standard condition of 20 feet between caravans, the number of caravans on the site is being gradually reduced.

A competition for the best kept plot is arranged each year and this provides a measure of incentive and encouragement to the

residents to cultivate their gardens and to maintain their plots in a tidy condition.

Water Supply

The Rickmansworth and Uxbridge Valley Water Company is the statutory undertaking which supplies water to the whole of the Council's district, with the exception of the parish of Cholebury-cum-St. Leonard's and a portion of the parish of The Lee, which are served by the Bucks. Water Board. In addition to maintaining a satisfactory quality of water, the water undertakings maintained a satisfactory pressure.

The following extensions were made to the mains during the year :-

Bucks Water Board

236 yards of size 3ins. A/C

Rickmansworth and Uxbridge Valley Water Co.

1663 metres of size 102 mm

4431 metres of size 610 mm

The natural fluoride content of the water supplied by the Rickmansworth and Uxbridge Valley Water Company was less than 0.1 part per million. The average natural fluoride content of the water supplied by the Bucks Water Board during 1972 was 0.12 mg. per litre as fluoride.

The following table shows the number of dwellings supplied with main water either direct or by means of a stand-pipe, at 31st December, 1972.

In the water supply statistics, calculations have been based on an average of 3.1 persons per house. Caravans average 2.5 persons per unit.

Parish	No. of Houses with main water supply		Population Supplied with main water	
	Direct	By Stand Pipe	Direct	By Stand Pipe
Amersham	5,789	—	17,946	—
Ashley Green	260	—	806	—
Chalfont St. Giles	2,279	3	7,065	7
Chalfont St. Peter	4,506	3	13,969	7
Chartridge	509	4	1,578	10
Chenies	356	—	1,104	—
Chesham Bois	885	—	2,744	—
Cholesbury	294	50	911	125
Coleshill	311	—	964	—
Latimer	315	—	977	—
The Lee	231	5	716	12
Great Missenden	2,689	7	8,336	17
Little Missenden	1,657	5	5,137	12
Penn	1,361	—	4,219	—
Seer Green	556	—	1,724	—
TOTALS	21,998	77	68,196	190

Water Samples

During the year 41 samples were taken from the public mains all of which were submitted for bacteriological examination and 11 were submitted for chemical examination. The reports on all except one of these samples were satisfactory.

Copies of typical reports on the results of the chemical analyses are given in Appendix II of this report.

107 samples were taken from other sources of water supply as follows:-

<i>Bore Holes:</i>	<i>Well:</i>	<i>Rainwater Tank:</i>
104	1	2

All these samples were submitted for bacteriological examination. Four were found to be unsatisfactory, two of these being taken from bore holes and two from the rainwater tank. In all cases appropriate precautions were taken.

34 samples were taken from swimming pools and submitted for bacteriological examination. Most of these were taken at the request of the County Education Authority from pools at schools. One was found to be unsatisfactory and the appropriate precautions were taken.

Drainage and Sewerage

The main centres of population at Amersham-on-the-Hill, Amersham Old Town, Chesham Bois, most of Little Chalfont, Chalfont St. Peter, Chalfont St. Giles, Seer Green and Jordans, part of Knotty Green, Hazlemere, part of Penn Village, Holmer Green, Prestwood, Great and Little Missenden, Chenies Village, part of Coleshill and Chartridge caravan site are provided with public sewers.

During the spring work commenced on the Botley, Lye Green and Ley Hill Main Drainage Scheme and the gravity section serving Botley and Tylers Hill was substantially completed by December. A small sewer extension to serve properties in London Road, Chalfont St. Peter and another to serve properties in Stanley Hill Avenue, Amersham, together with new development, were constructed during the summer and autumn.

The Misbourne Valley Relief Trunk Sewer and Balancing Tank Contract progressed well and was substantially completed by December and will be commissioned in the spring of 1973.

As a result it was possible to proceed with the Little Kingshill Main Drainage Scheme which was designed and let this year and was under construction. Also design work proceeded well on the Hyde Heath and South Heath Main Drainage Scheme which will go to tender in the spring of 1973.

The majority of areas seweraged are drained to the Misbourne Valley and then by deep gravity sewer to the West Hertfordshire Main Drainage Authority's works at Maple Cross for treatment. Other areas at the Rural District boundaries are drained into the sewerage systems of the adjoining Authorities. These are as follows:-

- | | |
|---|---|
| Part of Knotty Green
Hazlemere and part of
Penn Village | — Drainage to Beaconsfield U.D.C.
— Drainage to Wycombe R.D.C. |
|---|---|

Heath End, Great Kingshill — Drainage via Wycombe R.D.C.'s sewers to High Wycombe M.B.C.

Part of Chesham Bois and part of Chartridge — Drainage to Chesham U.D.C.
At the present time 14 pumping stations and 24 small sewage disposal works are maintained by the Council.

Cesspool Emptying Service

During the year 12 properties with cesspools or septic tanks were connected to the sewer and 13 new properties were constructed with cesspools. The general demand on the service during the year tended to increase owing to the construction of new cesspools coupled with the small amount of drainage construction completed.

Collection and Disposal of Refuse

Although the population in the district increased last year a regular weekly refuse collection service was maintained except during public holidays when it was extended to fourteen days for some house-holders. On these occasions paper sacks were issued to store refuse until it is collected the following week.

Charges are made for the collection of refuse from trade premises. To assist traders the Council has 421 refuse containers of $1\frac{1}{4}$ cu. yd. capacity on hire and located at shops, factories, etc. where large quantities of refuse are generated. These are emptied regularly by special purpose vehicles.

All other services for the collection and disposal of refuse showed an increase over last year. 2231 special collections of bulky household articles were made and the number of old cars brought to, or deposited at, the Depot totalled 421. Many residents used the free disposal facilities at the Depot during weekdays and weekends.

Regular collections were made from street litter bins throughout the district and this together with the removal of rubbish from roadside verges and pavement sweeping in shopping areas did much to maintain the amenities of the district.

The total tonnage of refuse collected was approximately 15,800 tons, all of which was disposed of outside the District.

Three Consents were issued under the Bucks County Council Act, 1957, authorising the deposit of refuse collected from outside our Rural District, subject to observance of conditions to prevent nuisance and to safeguard the underground water supply.

Rodent Infestation and Destruction

The Council continued the policy of undertaking contracts in respect of agricultural land and business premises, the number of contracts at the 31st December was 52, and covered 44 agricultural properties and 8 business premises. The contract, in most cases, is for one year with a minimum of four treatments.

During the year routine testing of all trunk sewers was introduced the effect of which will be that the whole of the sewers will be bait tested each year.

At the request of the Public Works Committee a squirrel shoot was undertaken by the rodent control staff in the woodlands owned by the Council at Prestwood and Chorleywood and was quite successful.

A summary of the work done is given below:-

No. of premises inspected for rats, mice and glis-glis .....	.....	1166
No. of treatments given to private premises for rats and mice .....	.....	505
No. of treatments to business premises for rats and mice .....	.....	4
No. of treatments to premises under contracts for rats and mice .....	.....	151
No. of wasps' nests destroyed.....	.....	178
No. of glis-glis (edible dormice) caught .....	.....	33
No. of bee swarms destroyed .....	.....	1

There was a decrease in the number of wasps nests destroyed from 517 in 1971 to 178 in 1972. Although not a statutory duty under the Prevention of Damage by Pests Act, 1949, the Council has agreed to undertake the work on a pre-payment basis as no other service is available to the ratepayers.

Many requests were again received for assistance in connection with birds, (particularly pigeons and starlings), insects and pests (other than rats and mice) such as squirrels, moles, foxes, etc. Such requests were dealt with at the discretion of the Rodent Officer. It was not practicable to do anything other than offer advice in respect of many of the enquiries received. Any work done, which is not within the statutory duties of the Council under the Prevention of Damage by Pests Act, 1949, is on a pre-payment basis.

Towards the end of 1971 the owner of two Labrador dogs alleged that they died from Warfarin poisoning and he submitted a claim for compensation. This was referred to the Council's insurers who resisted the claim for the reason that in their opinion there was no negligence on the part of the Council's Rodent Control staff. However, in 1972, the claim was submitted to the County Court and the judge found in favour of the claimant. This emphasises the care which must be taken in rodent control work.

SECTION VI

INSPECTION AND SUPERVISION OF FOOD

Food and Drugs Act, 1955

Milk and Dairies (General) Regulations, 1959

(i) The Bucks County Council, as the Food and Drugs Authority samples milk produced on farms in this district. These samples are sent for bacteriological examination primarily for tubercle bacilli, but the examination also reveals the presence of brucella organisms. When such organisms are isolated the District Medical Officer of Health is informed.

(ii) Complaints of dirty milk bottles continued to be received from time to time. In all cases the bottling establishment is given an opportunity of seeing the contamination with a view to keeping the staff alert at all times. All such establishments employ "spotters" at the bottling premises and most retailers pay a small premium to their roundsmen for each bottle which they find in an unsatisfactory condition.

Two prosecutions were taken and in both cases the firm concerned was convicted and fined a total of £250, plus £20 advocates' fees. In other cases warnings were given.

Milk Sampling

4 samples of pasteurised milk and one of sterilised milk were obtained and subjected to the methylene blue and phosphatase tests. All of these were found to be satisfactory.

Miscellaneous Sampling

Meat Products

55 samples of meat products, e.g. sausages, ham, salami, etc. were submitted for bacteriological examination. Five were found to be unsatisfactory. Appropriate steps were taken.

Ice-Cream

4 samples of ice-cream were submitted for bacteriological examination and the results were satisfactory.

Liquid Egg

4 samples were submitted for bacteriological examination and the results were all satisfactory.

Utensil Swabs

56 sets of utensil swabs were taken at kitchens of canteens, cafes hotels etc. These swabs, which are provided by the Public Health Laboratory Service, are wiped round the cups and plates which have been washed. The swabs are then placed in a sterile bottle and sent to the Laboratory for bacteriological examination. In 8 cases adverse reports were received. In these cases a further visit was made to the premises concerned to thoroughly examine the washing apparatus and the technique adopted. Invariably a repeat of the tests shows a considerable improvement.

Food Hygiene (General) Regulations, 1970

The inspectors continued their routine inspections of premises which are subject to the above Regulations and informal notices were served in cases where a contravention of the Regulations was found.

799 visits were made to all types of premises where food is prepared, stored or sold for human consumption. This we consider to be a very important part of the public health inspector's wide field of duties and to which too much time cannot be devoted.

The number of food premises subject to these regulations grouped in categories of trade carried on in them are listed below:-

Butchers .....	.....	.....	.....	.....	26
Catering establishments .....	.....	.....	.....	.....	41
Bakers and Confectioners .....	.....	.....	.....	.....	19
Greengrocers .....	.....	.....	.....	.....	18
Provision merchants .....	.....	.....	.....	.....	59
Fish Shops .....	.....	.....	.....	.....	3
					<hr/>
			Total		166
					<hr/>

Sections 2 and 8

22 complaints of alleged unfit food and of foreign objects in food were received during the year - an increase of nearly 50% over the figure for 1971. 10 of the complaints were of mould, mostly on meat products; 6 were of foreign bodies in food including chewing gum in a piece of confectionery, a cigarette filter in a can of prunes and a piece of glass in a bottle of shandy; 3 concerned insects or larvae; one of contamination; one of unsatisfactory canning and one of staleness.

A number of the above complaints were in respect of imported foodstuffs and an approach was made to both the Department of Health and Social Security and the Ministry of Agriculture, Fisheries and Food to ascertain what action these Departments can take. We were advised that they would welcome the opportunity of investigating complaints concerning imported foodstuffs but we were requested to exercise discretion in the matters referred to them.

The owner of a mobile vehicle was summonsed in respect of a mouldy steak and kidney pie and also for not displaying his name and address on the vehicle. He was convicted and fined £15.

Section 16

The number of premises registered under this section at the end of the year was 157, registered as follows:-

For the storage and sale of ice cream only	131
For the manufacture, sale or storage of ice cream and for the preparation and manufacture of sausages and preserved foods and cooking chicken	4

Meat Inspection at Slaughter houses

The following table gives details of the number of animals slaughtered at the two bacon factories, and one mixed slaughter-house, together with details of the post-mortem inspection:-

	<i>Cattle excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>
No. killed and inspected	3,492	2,676	25	1,550	72,757
<i>All diseases except Tuberculosis and Cysticerci</i>					
Whole Carcasses condemned	2	28	2	3	299
Carcasses of which some part or organ was condemned	1,157	1,806	1	260	27,206
Percentage of the number inspected affected with disease other than T.B. and Cysticerci	33.19%	68.53%	12.0%	16.96%	37.95%
<i>Tuberculosis only</i>					
Whole Carcasses condemned	—	—	—	—	3
Carcasses of which some part or organ was condemned	—	—	—	—	2,283
Percentage of the number inspected affected with T.B.	—	—	—	—	3.13%
<i>Cysticerci</i>					
Carcasses of which some part of organ was condemned	2	—	—	—	—
Carcasses submitted to refrigeration	2	—	—	—	—

For the preparation and manufacture of sausages and preserved foods and cooking chicken	17
For cooking fish and chips and chicken	5
	<hr/> 157 <hr/>

The total amount of meat condemned at these slaughterhouses was 41 tons 13 cwt. 1 qtr. 22 lbs. and the total amount of offal condemned was 38 tons 8 cwt. 3 qtrs. 7 lbs.

The condemned meat and offal and non-edible parts from the slaughterhouse operations are removed by a contractor and are used for the manufacture of soap and animal feeding stuffs.

Other Foodstuffs condemned:

Poultry	275 lbs
Meat	697½ lbs

Frozen Foods: 2,248 packets

Tinned Goods condemned:

Vegetables	952 tins	Milk	190 tins
Fruit	626 tins	Soup	200 tins
Meat	1,218 tins	Fish	107 tins

The 275 lbs of poultry was voluntarily surrendered at a poultry packing establishment and by far the greatest proportion of tinned goods was voluntarily surrendered at a wholesale grocer's premises. The condemned poultry and condemned food was removed under supervision to the Council's depot for disposal.

Poultry Inspection

There are two poultry processing premises within the district and there were 49 visits to these premises. The total number of birds processed during the year was 55,874 and this figure was made up of:-

41,564	Hens
13,820	Turkeys
490	Chickens

The percentage of birds rejected as unfit for human consumption was 0.5% and the weight of poultry condemned was 275 lbs.

Offices, Shops and Railways Premises Act, 1963

Further applications were received for registration under this Act and the following statistics were included in the annual report to the Department of Employment and Productivity:-

	<i>No. of Premises Registered at 31st December 1972</i>	<i>No. of Persons Employed at 31st December 1972</i>
Offices	192	1,436
Retail Shops	335	1,326
Wholesale Shops, Warehouses ..	10	292
Catering Establishment open to The Public, Canteens	44	286
Fuel Storage Depots	3	7
	584	3,347

The total of 3,347 employees consisted of 1,534 males and 1,813 females.

354 registered premises received a general inspection during the year and 74 other visits were made, making a total of 428 visits of all kinds.

14 informal notices were served.

Noise Control

In the report for 1971 reference was made to complaints of noise from the drying unit of a car washing machine, and that following a number of approaches to the owners to take all steps to reduce the noise, it was resolved that no further action be taken. However, further consideration was given to this matter in 1972, and it was decided to serve an Abatement Notice. Silencers were fitted and this had the effect of reducing the noise.

Slaughterhouse Act, 1958

The licences in respect of the two bacon factories and the mixed slaughterhouse were renewed.

Slaughter of Animals Act, 1958

The number of slaughtermans licences renewed was 27 and 3 new licences were issued.

Pet Animals Act, 1951

3 licences were renewed under this Act.

Animal Boarding Establishments Act, 1963

9 licences were renewed under this Act.

Game Act, 1831

The number of licences renewed was 10.

Petroleum (Regulations) Acts, 1928 and 1936

The number of licences renewed was 90.

A total of 228 visits were made under the Regulations as against 198 for the previous year.

Rag, Flock and other Filling Materials Act, 1951

2 premises are now registered under the above Act.

Samples of filling materials were obtained for analysis and found to be satisfactory.

Bucks County Council Act, 1957

Under section 52 of this Act, all persons carrying on the business of hairdresser or barber's shop are required to register with the local authority and the number of persons and premises registered at the end of 1972 was 38.

B. H. BURNE, M.R.C.S. (ENG.), L.R.C.P.(LOND.), D.P.H.
Medical Officer of Health

F. G. CAUDERY, F.A.P.H.I., M.R.S.H.
Chief Public Health Inspector

SECTION VII

APPENDIX I—

FACTORIES ACT, 1964

Part I of the Act

1 INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written notices (4)	Occupiers Prosecu- ted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	4	9	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	146	192	15	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	4	2	—	—
Total	154	203	15	—

2. Cases in which DEFECTS were found
 (If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more 'cases'.)

Particulars (1)	Number of cases in which defects were found			Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector (4)	
Sanitary Conveniences (S.7)				
(a) Insufficient	2	1	Nil	1
(b) Unsuitable or defective	13	13	Nil	Nil
(c) Not separate for sexes	Nil	Nil	Nil	Nil
Total	15	14	Nil	1

PART VIII OF THE ACT
Outwork
(Sections 133 and 134)

Nature of work (1)	Section 133		Section 134	
	No. of Outworkers in August list required by Section 133 (1) (c) (2)	No. of cases of default in sending list to Council (3)	No. of instances of work in unwholesome premises	Notices Served (6)
Wearing Apparel: Making, etc., Cleaning and Washing	118	—	—	—
Total	118	—	—	—

N.B.—Of the total of 118 shown in column (2) only 18 of the outworkers were resident in the area of the Amersham R.D.C. The appropriate local authorities were notified of the remaining 100 outworkers.
With regard to column (3) the employers in this district who employ outworkers invariably have to be reminded of their obligation to submit the list of outworkers.

APPENDIX II—

WATER SUPPLY

The following are copies of the Analyst's reports on the examination of samples from four different sources of main water:-

21st June 1972 Ref. M.51	Samples from tap at:- Mill House, Cholesbury	(Rickmansworth and Uxbridge Valley Water Company's supply)
21st June 1972 Ref. M.52	Samples from tap at:- White Cottage, Swan Bottom The Lee, Great Missenden	(Rickmansworth and Uxbridge Valley Water Company's supply)
21st June 1972 Ref. M.53	Samples from tap at:- 23 Chessfield Park, Little Chalfont	(Rickmansworth and Uxbridge Valley Water Company's supply)
21st June 1972 Ref. M.54	Samples from tap at:- "Ashworth", Highlands Lane, Chalfont St. Peter	(Rickmansworth and Uxbridge Valley Water Company's supply)

Reports

		M.51	M.52	M.53	M.54	
Appearance	.. ..	—	All Clear and Colourless			—
Reaction (pH)	.. ..	7.1	7.4	7.5	7.6	—

Parts per Million

Free Chlorine	.. ..	Nil	Nil	Nil	Nil
Total Solids	.. ..	305	315	330	345
Loss of Ignition	.. ..	20	35	15	15
Chlorine in Chlorides	.. ..	15	20	20	20
Ammoniacal Nitrogen	.. ..	Nil	Nil	Nil	Nil
Albuminoid Nitrogen	.. ..	0.01	0.01	Nil	Nil
Nitrate Nitrogen	.. ..	2.4	2.5	3.2	3.3
Nitrite Nitrogen	.. ..	Nil	Nil	Nil	Nil
Oxygen absorbed from permanganate (3hrs at 98°F)	.. ..	0.32	0.12	0.14	0.42
Hardness, Temporary	.. ..	238	236	259	229
Total	.. ..	238	236	259	28
				Alkalinity as Na_2CO_3	

Metals—Lead, Copper, Zinc ————— Not Found —————

Bacteriological Examination

Colonies on agar in 48 hours at 37°C	.. ..	Nil	Nil	Nil	Nil
Colonies on agar in 72 hours at 20°C	.. ..	Nil	Nil	Nil	Nil
Coliform bacilli	.. ..	—	Not Found in 100 mls	—	—

The Public Analyst was of the opinion that the water was on all occasions of high chemical bacteriological purity and suitable for drinking and domestic purposes.

FAMILY PLANNING ASSOCIATION

Three clinics are operating within the Amersham and Chesham Districts and they are as follows:-

AMERSHAM:	Out-Patients Dept. Amershan General Hospital, Monday, Tuesday, Thursday evenings, 7.00 p.m. – 8.00 p.m. Telephone: Amersham 4411 during session times.
CHALFONT ST. PETER:	Chalfonts & Gerrards Cross Hospital, Chalfont S. Peter, Tuesday 6.30 p.m. – 7.30 p.m. Wednesday 9.30 a.m. – 11.00 a.m. Telephone: Gerrards Cross 84750 during session times.
CHESHAM:	Ivy House, Red Lion Street, Chesham, Wednesday 11.30 a.m. – 12.30 p.m. Telephone: Chesham 6670 during session times.

In preparing this report there was an over-riding awareness that this would be the last report of its kind. Since their start in this district the family planning services have been organised by the Family Planning Association, (a registered charity) but during 1973 the larger part of the service in the County is to be transferred to the administrative control of the County Health Department.

The 1972 figures, which are a summary of the activity in the Amersham-Chesham clinics are given in table 1, they indicate a steadily maintained activity without any noteworthy trends.

Table 1
Clinic Statistics 1972

		<i>Sessions</i>	<i>Dr. Sessions</i>	<i>Total Patients</i>	<i>No. of Individuals attending</i>
Amersham	..	150	300	4583	1240
Chesham	..	51	102	1473	578
<i>New Patients</i>					
Amersham	..	559			
Chesham	..	165			

The figures in table 1 are a reflection of the work within the clinic that has direct connection with the patients but many enquiries about vasectomy were referred to the High Wycombe F.P.A. clinic.

Additional responsibility falls on the nursing staff in connection with the almost continuous training of nurses and health visitors for family planning work. The clinic doctors have similarly been engaged in doctor training.

The F.P.A. qualified speakers within our clinic have fulfilled a number of speaking engagements on family planning and associated topics.

Grants were received from Amersham, Beaconsfield, Chesham and High Wycombe Councils to offset the cost of the Information Service to Maternity Units in the area and to extend these to include the Shrubbery Maternity Home. At the request of the hospital medical staff and with the permission of the High Wycombe and District Hospital Management Committee the visits were also extended to include the Gynecology Ward at Amersham General Hospital. Only a small percentage of patients available for interview refuse discussion and two thirds of these cannot communicate because of language problems. When this situation arises, leaflets are left in the appropriate language. Clearly some action is needed to devise other forms of approach, i.e. a domiciliary service.

	<i>Percentage Patients seen after delivery</i>	<i>Not Had previous advice</i>	<i>Refused discussion</i>
Amersham G.H.			
Jan.-Dec.	84%	42%	2½%
Stone M.H.			
Feb.-Dec.	74%	31%	3%
Shrubbery M.H.			
Sept.-Dec.	82%	30%	7%

Since this is the last F.P.A. report, it is worthwhile to make an outline review of what has been accomplished since 1960. This is shown in Table 2.

Table 2
Statistics 1960 – 1972

<i>Amersham Sessions & Year</i>	<i>Total Visits</i>	<i>New Patients</i>	<i>Sessions</i>	<i>Chesham Total Visits</i>	<i>New Patients</i>
1960– 51 Sessions	565	303			
1961– 51 "	1200	388			
1962– 59 "	1566	391			
1963– 94 "	2024	428			
1964– 98 "	2541	542			
1965–118 "	3358	685			
1966–150 "	4253	872			
1967–189 "	4411	621	27	393	261
1968–176 "	4550	736	51	1327	286
1969–176 "	4648	660	51	1598	253
1970–150 "	4294	543	51	1761	236
1971–150 "	4540	640	51	1775	206
1972–150 "	5483	559	51	1473	165

Through-out the 13 years of the Family Planning Association administration, the clinic work has been enthusiastically supported by many local residents both as clinic-workers and offices or members of committees. Without their efforts the running of the clinics would have been much more difficult, if not impossible. Therefore it would be inappropriate to close the era of the Family Planning Association administration without a sincere acknowledgement of our gratitude for the help they have given.

S. BARNES
Senior Medical Officer
D. CUNDY
Clinic Secretary

F.P.A. MATERNITY UNIT SERVICES

The service which was extended to the Stone Maternity Home in February, 1972 was also enlarged in September to include five sessions a month at the Shrubbery Maternity Home, High Wycombe. Mrs. A. Suter was engaged for these visits.

At the suggestion of the medical staff at Amersham Hospital, Mrs. S. Paine and Mrs. L. Cooke extended their service to include selected patients in the gyne ward, chiefly miscarriages, complications at pregnancy and terminations. Some of these patients are as much in need of information about family planning services as the new mothers.

All interviews have to be undertaken with great tact and care and the overall number of patients interviewed where discussion was impossible (3%) is a good indication of the nurses' success in this matter.

In fact, the situation is really better than shown by the bare figures. In order not to complicate the statistics too much, all such cases are classified as "refused discussion", but in two thirds of the cases, contact is not possible due to language problems.

Where language problems arise it is normal practice to leave leaflets in the most appropriate language, but there are cases where patients cannot read. Clearly some action is needed to devise other forms of approach, e.g. a domiciliary service.

Overall the number of patients seen is just over 80% of the total deliveries. Some mothers have very short stays and it is doubtful if any extension of the present service would significantly raise the percentage seen. In view of the impending re-organisation of the Maternity Unit services in the High Wycombe area I consider that for the time being we should not make any attempt at further expansion.

D. CUNDY
Clinic Secretary

Printed by Chas. Luff & Co. Ltd., Slough, Bucks.

